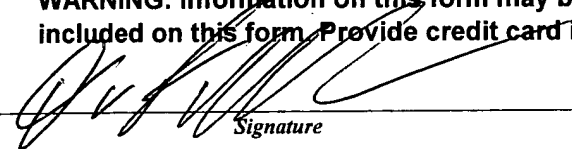
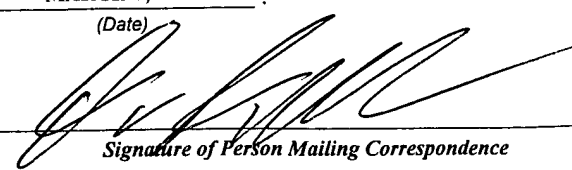


IFW

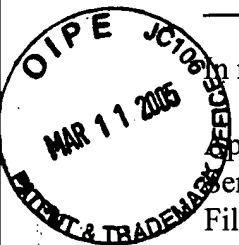
| | | | | | |
|--|---|-------------------------------------|---|-------------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER (Small Entity) | | | | Docket No. PA5309 | |
| Applicant(s): ROUHOLLAH EZMAILZEDEH | | | | | |
| Application No. 10/633,429 | Filing Date 08/04/2003 | Examiner DHIRU R. PATEL | Customer No. 000045889 | Group Art Unit 2831 | Confirmation No. 4534 |
| Invention: COVER PLATE ARRANGEMENT | | | | | |
| COMMISSIONER FOR PATENTS: | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 30 - | 20 = | 10 | x \$25.00 | \$250.00 |
| INDEP. CLAIMS | 5 - | 3 = | 2 | x \$100.00 | \$200.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$450.00 |
| <input type="checkbox"/> No additional fee is required for amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ | | | | | |
| <input checked="" type="checkbox"/> A check in the amount of \$450.00 to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____ | | | | | |
| <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. | | | | | |
| <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
|  _____ <i>Signature</i> | | | Dated: MARCH 7, 2005 | | |
| DON B. FINKELSTEIN, ESQ LAW OFFICES OF DON FINKELSTEIN 3858 CARSON STREET, SUITE 216 TORRANCE, CA 90503 | | | <div style="border: 1px solid black; padding: 5px;"><p>I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on MARCH 7, 2005 (Date)</p><p style="text-align:center"><i>Signature of Person Mailing Correspondence</i> DON FINKELSTEIN <i>Typed or Printed Name of Person Mailing Correspondence</i></p></div> | | |
| CC: | | | | | |
| | | | | | |
| | | | | | |

SERIAL NO.: 10/633,429

March 7, 2005

DOCKET NO.: PA.5309

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re Application of:

Applicant: Rouhollah Ezmailzadeh

Serial No.: 10/633,429

Filed: 08/04/2003

Title: Cover Plate Arrangement

Examining Attorney : Dhiru R Patel

Art Unit: 2831

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail addressed to:
MAIL STOP NON FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22213-1450

on: March 7, 2005

Don Finkelstein

Dated: March 7, 2005

RESPONSE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22213-1450

Sir:

Responsive to Office Action dated December 16, 2004, please enter the specification and claim amendments and the new claims as set forth below.

03/14/2005 EAREGAY1 00000031 10633429

01 FC:2201

200.00 OP

02 FC:2202

250.00 OP